

TRANSMITTAL FORM

Application Number	10/574,739
Filing Date	April 17, 2007
First Named Inventor	Ulrich Albrecht-Fruh
Group Art Unit	1793
Examiner Name	Kuang Y. Lin
Attorney Docket No.	20496-515
Patent No.	Not Applicable
Issue Date	Not Applicable

ENCLOSURES (check all that apply)

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|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets <u> </u>]
<input checked="" type="checkbox"/> 3 Month Petition for Extension of Time

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
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<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)
<input checked="" type="checkbox"/> Replacement Drawing(s) (2 Sheets)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance | <input type="checkbox"/> Request for Certificate of Correction

<input type="checkbox"/> Certificate of Correction

<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

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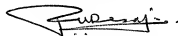
<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
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|---|--|--|

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Proskauer Rose LLP
 One International Place
 Boston, MA 02110-2600
 Tel. No.: (617) 526-9600
 Fax No.: (617) 526-9899

SIGNATURE BLOCK

Respectfully submitted,



Date: June 30, 2008
 Reg. No. L0312
 Tel. No.: (617) 526-9747
 Fax No.: (617) 526-9899

Pankaj N. Desai
 Agent for the Applicants
 Proskauer Rose LLP
 One International Place
 Boston, MA 02110-2600